

# Chronic Obstructive Pulmonary Disease (COPD) And Asthma

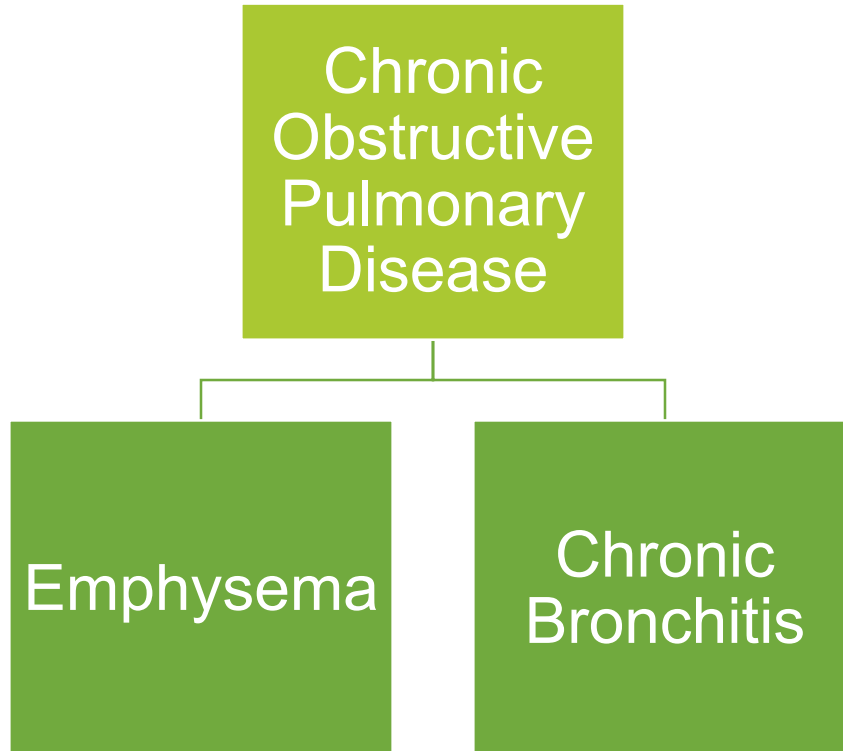
*Documentation and Coding*



# Topics

- **Overview of COPD and Asthma**
- **Documentation and Coding Tips**
- **Improving HEDIS® Scores**
- **Resources**

# What is COPD?



- COPD is a chronic condition that is progressive and makes it hard for a person to breathe over time.
- Symptoms: Chronic cough, shortness of breath, frequent respiratory infections, cyanosis, mucus production.
- No cure, but it can be prevented and treated.

# Causes of COPD



## Smoking

- Z72.0 Tobacco Use
- F17.2- Nicotine Dependence
- Z87.891 History of Nicotine Dependence

## Environmental

- Z57.3 - Occupational exposure to other air contaminants
- Z77.1 - Contact with and (suspected) exposure environmental pollution and/or hazards in the physical environment

## Genetic

- E88.01 Alpha-1-antitrypsin deficiency

## Diagnosis

- ☐ Past Medical History
  - ☐ Smoking History
  - ☐ Environmental Exposures
  - ☐ Family History
- ☐ Review of Symptoms
  - ☐ Shortness of Breath
  - ☐ Chronic Cough
- ☐ Diagnostic Tests
  - ☐ Spirometry
  - ☐ Chest X-Ray
  - ☐ Arterial Blood Gas Test

## Treatment

- ☐ Medications
  - ☐ Bronchodilator
  - ☐ Anti-inflammatory
- ☐ Pulmonary Rehabilitation
- ☐ Supplemental Oxygen



# Asthma

Asthma is a chronic lung disease that has no cure. As air moves through your lungs, the airways become smaller.

The causes of asthma are unknown but there are common triggers.



## Asthma Condition Codes

J45.20 – Mild  
Uncomplicated  
Asthma

J45.52 – Severe  
Persistent Asthma  
with Status  
Asthmaticus

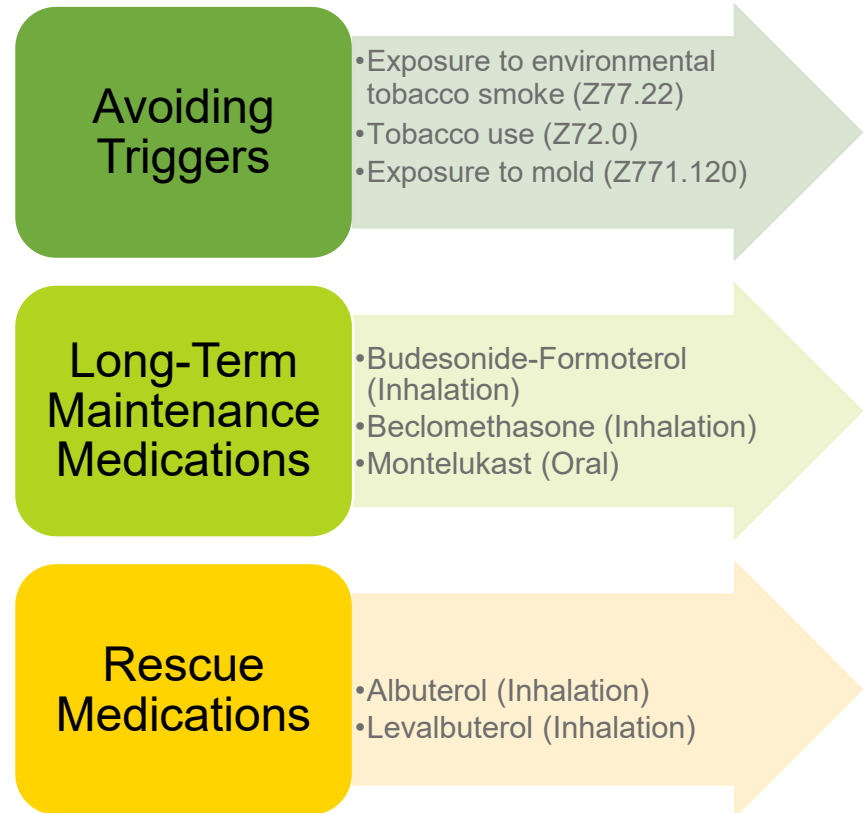
J45.990 – Exercise  
Induced  
Bronchospasm

# Asthma

## Diagnosing

- ☐ Past Medical History
  - ☐ Current Medications
  - ☐ Allergies
  - ☐ Environmental Factors
  - ☐ Family History
- ☐ Review of Symptoms
  - ☐ Shortness of Breath
  - ☐ Wheezing
  - ☐ Coughing
  - ☐ Tightness in Chest
- ☐ Physical Exam and Testing
  - ☐ Examine ears, nose, throat, chest, lungs, etc.
  - ☐ X-Ray of Lungs and Sinuses
  - ☐ Lung Function Test
    - ☐ Spirometry
    - ☐ Peak Airflow

## Treating



# Documentation and Coding Tips





# M.E.A.T.



- Signs, Symptoms, disease progression, Disease Regression
- **Example:** CHF, Symptoms well controlled on Lasix and Ace Inhibitor. Continue to monitor.

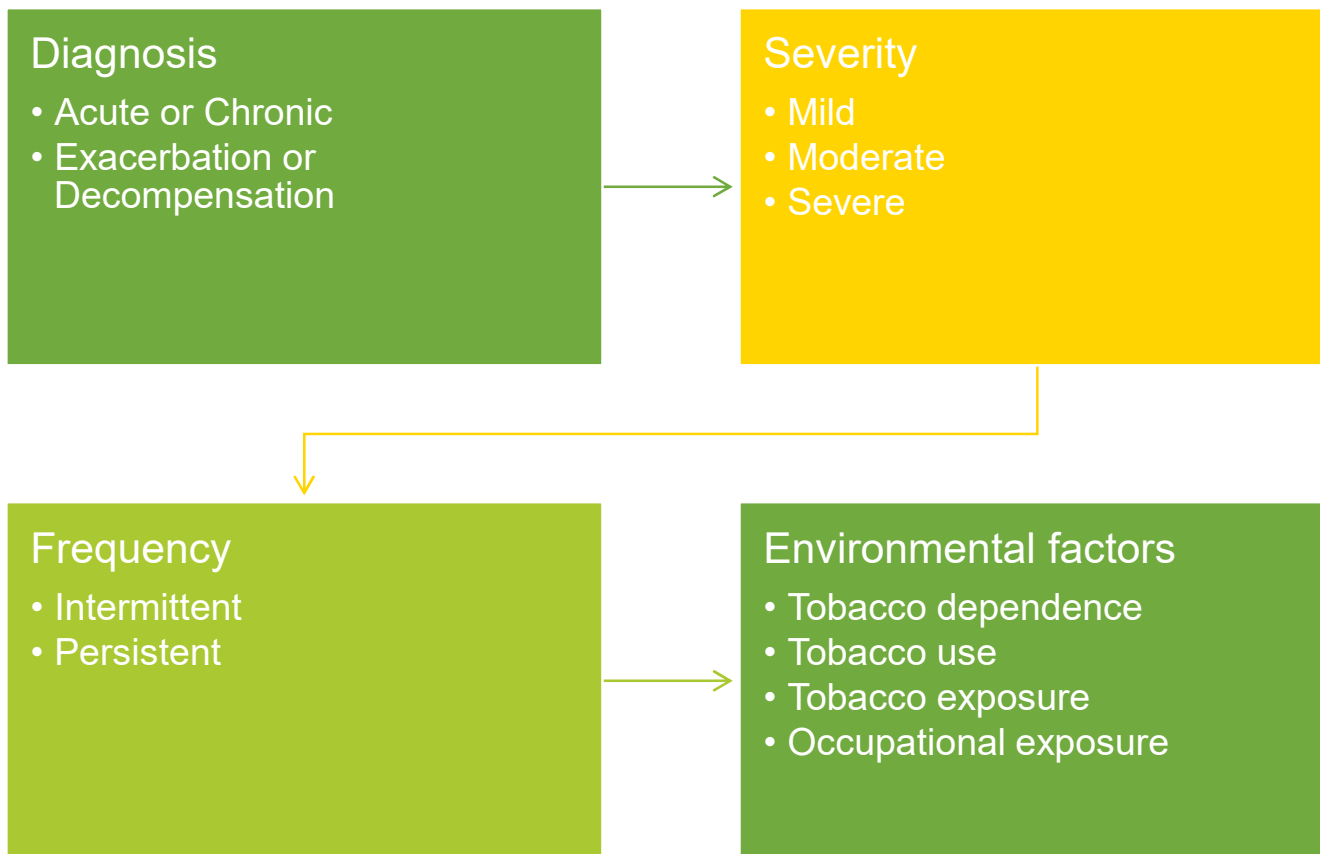
- Test results, medication effectiveness, response to treatment
- **Example:** Major depression, Zoloft 50 mg per day, patient still feels hopelessness. Raise to 100 mg for the next two weeks.

- Ordered tests, discussion, review records, counseling
- **Example:** type 2 diabetes, reviewed labs and a1c well controlled with insulin, diet and exercise.

- Medications, Therapies, other modalities
- **Example:** Protein calorie malnutrition, down 5 lbs. since last visit. Start Ensure BID

A valid reportable diagnosis requires documentation supporting that the condition is being managed, evaluated, assessed or treated.

# Coding of COPD and Asthma



Refer to the ICD-10-CM Coding Guidelines for complete information.

# Improving HEDIS® Scores



# HEDIS® Measures for COPD

## Pharmacotherapy Management of COPD Exacerbation (PCE)

### ➤ The Measure States

- The percentage of COPD exacerbations for members 40 years and older who had an acute inpatient discharge or emergency department visit on or between January 1 and November 30 of the measurement year and who were dispensed appropriate medications. There are two rates reported:
  - 1. Dispensed a systemic corticosteroid (or there was evidence of an active prescription) within 14 days of event.
  - 2. Dispensed a bronchodilator (or there was evidence of an active prescription) within 30 days of the event.

### ➤ To Improve HEDIS® Scores

- Schedule a follow-up appointment within 7-14 days of discharge.
- Perform a medication review and ensure your patient is using their inhalers correctly.

### ➤ Documentation

- Avoid using “history of” if the patient is still being monitored and treated for the condition.

# HEDIS® Measures for COPD

## continued

### Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)

#### ➤ The Measure States

- The percentage of members 40 years and older with a new diagnosis of COPD or newly active COPD, who received appropriate spirometry testing to confirm the diagnosis.

#### ➤ To Improve HEDIS® Scores

- This measure uses administrative claims information to identify adults 40 and older with a COPD diagnosis, and looks for a claim for spirometry testing.
- You will receive the highest scores if you document spirometry testing accurately on a claim.

#### ➤ Coding\*

- CPT codes include: 94010, 94014-94016, 94060, 94070, 94375, 94620.

\*Always verify correct coding when submitting claims

# HEDIS® Measure for Asthma

## Asthma Medication Ratio (AMR)

### ➤ The Measure States

- Assesses adults and children 5–64 years of age who were identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year.

### ➤ To Improve HEDIS® Scores

- Members 5 and older with persistent asthma should be prescribed and remain on an asthma controller and be provided with an asthma action plan.
- Ensure members referred for asthma keep their appointment.
- Keep list of member medications current to include medications from other providers.

### ➤ Coding

- When coding COPD with asthmatic conditions code both the COPD and Asthma.



# Provider Resources



# Iowa Total Care Resources



- Get the tools you need at [iowatotalcare.com](http://iowatotalcare.com). From the Provider tab on our website you can access:
  - Your [Clinical Quality Consultant's](#) contact information
  - Training on programs and gap closure support to fit your practice needs
  - [Manuals, forms and HEDIS® tip sheets](#) to assist with caring for your patient.
- From the [PCP Portal](#):
  - Click on **Patient** and select member's name to access patient's medical records
  - Click on the **PCP Analytics** link to be directed to your Quality dashboard and P4P Scorecard
  - Click on **Authorization** to create or view status of a submitted prior authorization
  - Click on **Claims** to review status of submitted claims.
- Patient Education Resources
  - [Krames](#) Health Library
    - Asthma Action Plan, What is Emphysema?
    - Albuterol Inhalation Aerosol, Budesonide Inhalation
  - [Value-Added](#) Services
    - [Quit](#) Smoking Programs - QuitLogix®
    - MyHealthPays®



# Clinical Quality Consultants Territory Map



**iowa total care™**

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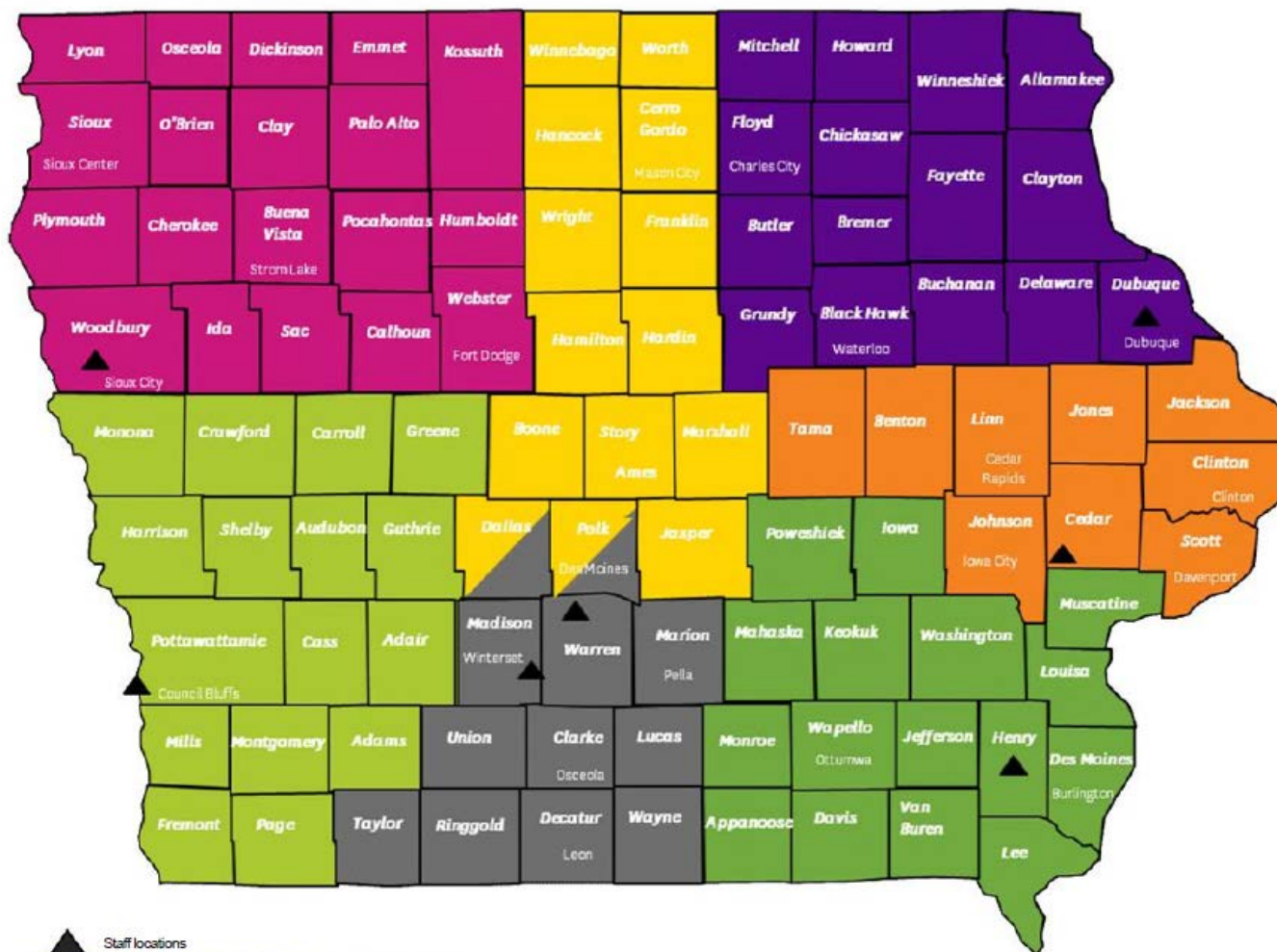
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Staff locations

# QUESTIONS?